



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 3045

| | | | | |
|------------------------------------|---|---------------------|-------------------------------|---|
| SERIAL NUMBER 10/781,426 | FILING OR 371(c) DATE 02/18/2004 RULE | CLASS 607 | GROUP ART UNIT 3762 | ATTORNEY DOCKET NO. P0008050.05/LG10126 |
|------------------------------------|---|---------------------|-------------------------------|---|

APPLICANTS

David J. Jorgenson, Bloomington, MN;
 Ross O. Starkson, Minneapolis, MN;
 Rick D. McVenes, Isanti, MN;
 Charles D. Trautmann, Ham Lake, MN;
 John D. Wahlstrand, Shoreview, MN;
 Bradley C. Peck, Ham Lake, MN;

**** CONTINUING DATA *******

This application is a CIP of 09/487,562 01/19/2000 PAT 6,317,633

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

** 05/11/2004

| | | | | |
|---|-------------------------------|----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no | STATE OR COUNTRY MN | SHEETS DRAWING 9 | TOTAL CLAIMS 16 | INDEPENDENT CLAIMS 1 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged | Examiner's Signature | Initials | | |

ADDRESS

27581

TITLE

IMPLANTABLE LEAD FUNCTIONAL STATUS MONITOR AND METHOD

| | | |
|-----------------------------------|---|--|
| FILING FEE RECEIVED 770 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees |
| | | <input type="checkbox"/> 1.16 Fees (Filing) |
| | | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |
| | | <input type="checkbox"/> 1.18 Fees (Issue) |
| | | <input type="checkbox"/> Other _____ |
| | | <input type="checkbox"/> Credit |